

## Comments of Charles Klivans, Dennison TX

### ***Comment:***

I am not a health professional, but in fact a retired Mechanical Engineer who specialized in a career dedicated to command and control hardware and software development on such programs as the Saturn Five Second stage checkout, and most recently, before retirement, I was the Aerospace Corporation responsible engineer for verification of the Global Positioning System (GPS) hardware and software as required by contract to the U.S. Air Force, from 1976 through 1993 when I retired after success rewarded by our team's winning the Collier Trophy in 1993. When my wife had a stroke, in 1993, I retired at age 68.

My experience with ETS starts with free cigarettes in the U.S. Navy in 1945 and the unusual result that I became a lifelong non-smoker. I was neither addicted to or an admirer of smoking. I couldn't stand the things. I gave my smoking friends all my cigarettes. My first wife was a smoker and we were married for 47 years. She smoked regularly (2 packs a day) and died of Colon Cancer in Jan. 2002, with all doctors agreeing that smoking had nothing to do with her Colon Cancer. I was exposed to ETS through both courtship and marriage for 56 years. I recently re-married to another smoker, so I have been exposed to ETS for 57 years. When is it going to cause some disease that will kill me? I'm now 79 and ETS has had no effect on me. If it shortens my life, I will still have lived longer than the average predicted by the Surgeon General (SG).

My background to comment on ETS is based on my reading as many SG reports as I could find, the text "Foundations of Epidemiology", the Program Description Document of SAMMEC, the program that is used to determine the "risk" of smoking, and a text by Steven J. Milloy (Science Without Sense) which de-bunks the EPA effort to use "Risk" as means of damning smoking. I have studied the difference in "proof" of cause as determined by Engineering's Scientific Method, and "Risk" as indicating cause by medically favored Epidemiology. It is like Apples and Oranges, where "risk" is a mathematical simulation, and "cause" is the result of physical testing, not simulation. Steven Milloy's book has a Table that shows the "Risk" of ETS as 1.13, a value lower than the "Risk" of sudden heart attack from 3 cups of coffee a week! While the Tome "Foundations of Epidemiology" states that Biological Credibility must support the Epidemiological findings (I cannot find ANY biological credibility to ETS as a report that proves ETS kills anything) it still leaves the door open if the "Risk" exceeds 3.0. But there is no Biological credibility to the claim ETS is a threat unless you consider the off-hand comment so often used that "ETS has 4,000 chemicals in it" some of which are known poisons. But the amount required of any of these chemicals to be dangerous is not mentioned, (the threat of poison is in the dose) and the amount produced is also not shown. The current value of (Risk) of 1.13 was reached by the EPA who was chastized in court for the method they used to even get that miniscule value by a judge Osteen. Careful review of the 34 "studies" making up the basis for the risk of ETS reveals two of the "studies" "Risk" value show ETS is GOOD for you! (less than 1.0). There is NO RISK to ETS. This was recognized until about 1980 when it became "unfashionable" to admit there is not only no scientific evidence, but also no risk from second hand smoke. An actual test report in 1972 shows that worst case, ETS totals 2 dozen cigarettes a year!.

The real problem with ETS is that no one worries about "cause" any more because Epidemiological studies to determine "risk" are used instead of tests to find cause. That is why with all the hoopla about restricting smoking and de-toxing cigarettes, the American Cancer Society presents reports every year that estimate an increase in lung Cancer while smoking decreases. This indicates the Epidemiological findings are false. The inflexible medical approach that rules out any possibility of escape from the "risk" of smoking is absurd in the face of people like me who are NOT addicted, do not react to ETS and also from smokers who smoke all their lives and die of old age, and people who NEVER smoke, avoid contact and die of lung cancer.

The above write up or report, stem from my own experience. I have noted others come to the same conclusions independently also. I feel that the loss of testing for cause has lost out to easy computer based studies that syphon off all the tax money that should be used to find "cause"

I intend to sell my home in California, where nothing is good enough, to live with my new wife in Texas at the home above in Dennison, until something gets us!.

**Response:**

*The comment indicates confusion as to the probabilistic nature of risk. There are a number of active smokers who live well into old age too. The report does not contend that everyone in contact with ETS dies from ETS. Rather, a thorough examination of the epidemiological and toxicological literature leads the majority of scientists to conclude that ETS exposure is associated with a number of adverse health outcomes. The comment does not supply alternative scientifically valid studies to contradict those conclusions in the report linking specific adverse health outcomes to ETS.*